☐ Initial ☐ Unannounced Full/Partial ☒ Follow-up ☐ Location Change ☐ Investigation ☐ Other _____

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Northwood Child Care Date: 4/13/22 Time: 2:40

Location Address: 24 Frog Pond Rd., Woodstock Telephone #: 860-928-7012

e-mail address: jbaker@northwoodchildcare.com License #: 166553 Expiration Date: 1/31/2025

Capacity: 50 # of Children Present: 9 # of Staff Present: 3

Consent to Inspect Family Child Care Home	*I agree to allow the Office of Early Childhood to have access to and inspect this facility and all child care records as required by Family Child Care Home Regulations.* ***Provider/Applicant/Substitute's Signature*** _____

Purpose of visit: Follow up to 3/2/22 inspection.

Observations/Corrections needed:

Follow up to 3/2/22. Inspect playground not done due to snow cover. Check all CAP items.

2- Employee orientation - observed/compliant.
3- Annual policy review - observed/compliant.
9- Fire Marshall certificate - 3/23/22 - compliant.
10- OEC Complaint procedure - observed - compliant.
12- Menus - observed posted/Compliant.
13- Emergency plans - observed posted/Compliant.
17- Professional Development - observed/compliant.
24/25 First aid/CPR trained staff - observed/compliant.
26(27)- Agreements & logs - Agreements observed. No logs.
43- Handwashing - Discussed/Compliant
44- First aid kit - - Compliant

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 4/27/22

Signature: Linda Moylan (OEC Representative)
Print Name: Linda Moylan

Signature: Morgan L Mowry (Person in Charge)
Print Name: Morgan L Mowry

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Northwood Child Care License # 16553 Date: 4/13/22

Observations/Corrections needed:

(49)- Lead water test - not yet complete.
73- Emergency phone numbers-
80- CO detector - observed/compliant.

(88)- Less than 8" of impact material under equipment on playgrounds.

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

Signature: Linda Moylan (OEC Representative)

Print Name: Linda Moylan

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: 4/27/22

Signature: Morgan L Mowry (Person in Charge)

Print Name: Morgan L Mowry